Mobile Units – Frequently Asked Questions

1. Q: What is the difference between a mobile unit and a mobile pharmacy?

A: A mobile unit is an extension of a pharmacy license held by the county, city and county, or special hospital authority that provides prescription medication within its jurisdiction to individuals without fixed addresses, individuals living in county-owned or city-and-county-owned housing facilities, and those enrolled in Medi-Cal plans operated by the county or a city and county, a health district, or a joint powers authority pursuant to Chapter 7 (commencing with Section 14000) or Chapter 8 (commencing with Section 14200) of Part 3 of Division 0 of the Welfare and Institutions Code.

Whereas a mobile pharmacy is used temporarily when a pharmacy is destroyed or damaged, and the mobile pharmacy is necessary to protect the health and safety of the public under specified conditions. The Board must be contacted to approve the use of a mobile pharmacy and the pharmacy must provide the Board with records of the destruction of, or damage to, the pharmacy with an expected restoration date prior to operating a mobile pharmacy.

A mobile pharmacy can also be employed during a declared federal, state, or local emergency in impacted areas in order to ensure the continuity of patient care under specified conditions, including being located within the declared emergency or affected areas. An approved waiver from the Board is required to operate a mobile pharmacy during a declared emergency.

(BPC 4062(c), BPC 4110(c), BPC 4110.5)

Q: How many mobile units may a county, city and county, or special hospital authority pharmacy operate?

A: A county, city and county, or special hospital authority may only operate one mobile unit.

(BPC 4110.5)

2. Q: What "special hospital authority" can operate a mobile unit?

A: The special hospital authority that may operate a mobile unit is limited to the Alameda Health System described in Chapter 5 (commencing with Section 101850) and the Kern County Hospital Authority Act describe in Chapter 5.5 (commencing with Section 101852 of Part 4 of Division 101 of the Health and Safety Code.

3. Q: How can a county, city and county, or special hospital authority notify the Board of their intent to operate a mobile unit?

A: At least 30 days prior to commencing operations of a mobile unit, the county, city or county, or special hospital authority must notify the board of its intention to operate a mobile unit. To assist with notification requirements, the Board has developed a form that can be accessed here.

(BPC 4110.5(f)

4. Q: I am an independent retail pharmacy and would like to service my community by helping the homeless by providing better access in obtaining their medications. Can I operate a mobile unit?

A: No, only a county, city and county, or special hospital authority described in Chapter 5 commencing with HSC 101850 or Chapter 5.5 commencing with HSC 101852 may operate a mobile unit to provide prescription medications.

(BPC 4110.5)

5. Q: Can a clinic licensed by the Board pursuant to BPC 4180 qualify to operate a mobile unit?

A: No, a mobile unit can only be operated as an extension of a pharmacy license.

(BPC 4110.5)

6. Q: Our county operates a mobile unit. At the end of the day, can we park the mobile unit in a secured garage located where the pharmacy operating the mobile unit is located? Can we leave the drugs in the mobile unit if the garage has a security gate only accessible with a key fob by authorized personnel, the garage is well lit and there is a security guard that patrols the area?

A: No, dangerous drugs must not be left in the mobile unit during the hours the mobile unit is not in operation. Mobile units are extensions of the pharmacy when they are open for business and when not in use the stock of dangerous drugs and devices must be stored in the pharmacy.

(BP 4110.5(e))

7. Q: At the end of the day, where can the mobile unit be parked?

A: Pharmacy law does not specify where the mobile unit is required to be parked. However, when the mobile unit is not operating, the drugs cannot be left in the mobile unit. Therefore, the Board recommends the mobile unit be parked at or close to the address of the licensed pharmacy since the drugs are required to be stored and secured at the licensed pharmacy operating the mobile unit.

(BPC 4110.5, CCR 1714(b)(d))

8. Q: If a county, city and county, or special hospital authority are planning to discontinue the use of a mobile unit, how should the Board be notified?

A: Notice must be given to the Board at least 30 days prior to discontinuing the operation of a mobile unit. To assist with notification requirements, the Board has development a form that can be accessed here.

(BPC 4110.5(f))

9. Q: Does the mobile unit require the Notice to Consumer poster to be posted in public view?

A: Yes, the mobile unit operates as an extension of a pharmacy license. Pharmacy law requires every pharmacy to prominently post in a place that is conspicuous and readable by a prescription drug consumer. The mobile unit must use the standardized poster available by the Board unless the pharmacy has received prior approval of another format or display methodology from the board. The mobile unit can also display the notice on a video screen. In addition to the English version required to be posted, the Notice to Consumer poster is also available in other languages from the board and may be printed from the board's website.

(BPC 4110.5, CCR 1707.6)

10.Q: Is the mobile unit required to have hot and cold running water?

A: Yes, the mobile unit operates as an extension of a pharmacy license. Therefore, the mobile unit is required to have a sink with hot and cold running water for pharmaceutical purposes.

(BPC 4110.5, CCR 1714(c))

11.Q: Who can possess the keys to the mobile unit:

A: The mobile unit operates as an extension of a pharmacy license. When drugs are stored in the mobile unit, the key to the mobile unit is restricted to a pharmacist. The pharmacy owner (the county, city and county, or the special

hospital authority) may possess a key to the mobile unit that is maintained in a tamper evident container for the purposes of 1) delivering the key to a pharmacist or 2) providing access in case of emergency that would include fire, flood or earthquake. The signature of the pharmacist-in-charge must be present in such a way that the pharmacist may readily determine whether the key was removed from the container.

(BPC 4110.5, CCR 1714(d)(e))

12.Q: Can the County pharmacy operate a mobile unit to assist the County's methadone program to dispense methadone to better serve the homeless population?

A: No, methadone is classified as a Schedule II controlled substance and a mobile unit cannot carry or dispense controlled substances.

(BPC 4110.5(d))

13.Q: What are the staffing limitations for a mobile unit?

A: A mobile unit operates as an extension of a pharmacy. Therefore, if the pharmacy operating the mobile unit has a community pharmacy license (PHY or PHE), then the pharmacy with only one pharmacist must have no more than one pharmacy technician performing the tasks specified in BPC 4115(a). Any additional pharmacist, the ratio of pharmacy technicians to pharmacist shall not exceed 2:1.

(BPC 4110.5, BPC 4115(f)(1))

14.Q: Can a pharmacist working on a mobile unit provide vaccine administration?

A: Yes, the pharmacist may provide vaccine administration. In addition to dispensing prescriptions, the pharmacist may perform activities consistent with pharmacy law listed in Article 3 commencing with BPC 4050.

(BPC 4110.5(b), BPC 4050-4068)

15.Q: During the temporary absence of a pharmacist for their 30-minute meal break, can the pharmacist leave the mobile unit leaving the pharmacy technicians and clerks in the mobile unit and continue to fill prescriptions?

A: The decision to keep the mobile unit open resides with the pharmacist working in the mobile unit. As part of the decision making, the pharmacy must reasonably believe that the security of the dangerous drugs and devised will be maintained in the pharmacist's absence.

If the mobile unit remains open during any temporary absence of the pharmacist no prescription medications may be provided to the patient or

patient's agent unless the prescription medication is a refill medication that the pharmacist checked and released for furnishing to the patient and the pharmacist determined that a consultation was not required. The ancillary staff may continue to perform the non-discretionary duties authorized by pharmacy law.

During the temporary absence of the pharmacist, an intern pharmacist may not perform any discretionary duties nor otherwise act as a pharmacist. However, the intern pharmacist may perform non-discretionary tasks such as removing the drugs from stock, counting, pouring, or mixing pharmaceuticals, placing the product into a container, packaging and repackaging.

Note: To operate a mobile unit, a licensed pharmacist must be on the premises and the mobile unit must be under the control and management of a pharmacist except during the pharmacist duty free breaks and 30-minute meal break. Medications should not be dispensed while a pharmacist is on break except for refills released by the pharmacist that do not require a patient consultation.

(BPC 4110.5(a), CCR 1714.1(a)(b)(c)(d)), CCR 1793.2

16.Q: Our mobile unit has very limited storage space. Where can a mobile unit store its records?

A: All records required by BPC 4081 and 4105 may be temporarily stored in the mobile unit while in operations. At the end of the day, when the mobile unit is not in operation, all records required by BPC 4081 and 4105 must be transferred and maintained on the licensed pharmacy premises that is operating the mobile unit. All required records must be preserved for at least three years from the date of making. If the licensed pharmacy has an approved waiver for storing records offsite from the board, the records from the mobile unit for non-controlled substances are required to be stored on the licensed pharmacy premise for a period of one year from the date of making. The records beyond one year from the date of making may be stored at the approved offsite storage location.

Note: A mobile unit cannot carry or dispense controlled substances. Therefore, the mobile unit should not have any records for controlled substances.

(BPC 4110.5, BPC 4081, BPC 4105)

17.Q: Are the prescription labels dispensed by the mobile unit required to have patient centered labeling?

A: Yes, all prescription medication dispensed by the mobile unit must comply with all labeling requirements applicable to a California licensed pharmacy, including all the requirements for patient centered labeling. Also, upon request of the patient or patient's representative, the mobile unit must provide translated directions for use printed on the prescription container, label, or on a supplemental document.

(BPC 4076, BPC 4076.5, CCR 1707.5)

18.Q: Are pharmacists required to provide consultation for new prescriptions dispensed from the mobile unit?

A: Yes, the mobile unit is an extension of the licensed pharmacy. Therefore, the same requirements for consultation pursuant to CCR 1707.2 applies for patient consultation.

(BPC 4110.5 CCR 1714)

19.Q: If a physician is practicing in the mobile unit, writes a new prescription for the patient and consults the patient on how to take the new medication, is the pharmacist also required to provide consultation to the patient when the mobile unit dispenses the new prescription to the patient?

A: Yes, the pharmacist is still responsible to provide patient consultation pursuant to CCR 1707.2.

(BPC 4110.5, CCR 1711)

20.Q: Does a board inspector have the authority to inspect a mobile unit?

A: Yes. Inspectors employed by the board may inspect during business hours all pharmacies or places where drugs or devices are compounded, prepared, furnished, dispensed, or stored.

(BPC 4008)

21.Q: When the mobile unit is in use, what security and maintenance measures are required for the drugs stocked and patient confidential records in the mobile unit?

A: The mobile unit is an extension of the pharmacy. Therefore, the mobile unit is required to maintain its facility, fixtures, and equipment so that drugs are safely and properly prepared, maintained, secured and distributed. The mobile unit, fixtures and equipment must be maintained in a clean and orderly condition. The mobile unit must be dry, well-ventilated, free from rodents and insects, and properly lighted. Each pharmacist while on duty is responsible for the security of

the prescription drugs on the mobile unit, including provisions for effective control against theft or diversion of dangerous drugs and devices, and records. When the mobile unit is not in use, the dangerous drugs and patient confidential records must be safely removed from the mobile unit to the licensed pharmacy.

To ensure security of the drug stock and patient confidential records, the board recommends the mobile unit to consider the following:

- When the mobile unit is in operation, the drugs are secured to prevent drugs from being displaced while the mobile unit is in motion.
- Use of a secured and lockable storage unit for the dangerous drugs and devices, and patient confidential records that is easily transferrable to the licensed pharmacy at the end of the day.
- Coordinating breaks and meal breaks if the pharmacist leaves the mobile unit and the pharmacy technician(s) remain in the mobile unit.
- Relocating the mobile unit to a safe area during meal breaks.

(CCR 1714(b)(c)(d))